MILLIN

USER CHARGE SELF MONITORING REPORT

DEC 1 9 2008

NAME

Allen Linen Supply and Laundry

ADDRESS

407 20th Ave Paterson N.J.

FACILITY LOCATION

971 E 24th Street Paterson N.J.

NEW CUSTOMER ID / OUTLET ID: 37330006-2

OLD OUTLET DESIGNATION:

	START			END	
11	01	08	11	30	08
МО	DAY	YR	МО	DAY	YR

VOLUME	DISCHARGE	ED THIS PERIOD
sanitary	8,560	GALLONS
1		
/ EFFLUENT	METER REA	ADING LAST DAY
THIS PERIOD		

DATE	BOD	TSS		DATE	BOD	TSS
11/30	137	131				
1			03	031-123		
			1300	1 56		
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			25;	FEB 2009	5	
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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

TELEPHONE NUMBER	TYPE NAME AND TITLE	SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT
973-742-6131	Chris Gomez Operations Mgr	Chen must
12/10/2008		
1		

PVSC FORM MR-2 REV .3 6/93

Allen Linen 11/08 Sanitary Meter Reading 810550starting reading 819110ending reading

> 819110 810550 8560 gallons

8560divided by 16=535gpd

NAME Allen Linen Supply and Laundry Service **ADDRESS** 407 20th Ave Paterson N.J. **FACILITY LOCATION** 971 E 24th street Paterson N.J. **OLD OUTLET DESIGNATION:** NEW CUSTOMER ID / OUTLET ID: 2722 000 6-1 MONITORING PERIOD **VOLUME DISCHARGED THIS PERIOD GALLONS** START **END** 1,498,479 **GALLONS** 11 01 08 08 11 30 EFFLUENT METER READING LAST DAY MO YR THIS PERIOD DAY YR MO DAY DATE TSS DATE BOD TSS BOD 11/19/2008 542.0 11/19/2008 111.00 ELLLO19 I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry

USER CHARGE SELF MONITORING REPORT

SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT	TYPE NAME AND TITLE	TELEPHONE NUMBER
Ald wut c	hris Gomez Operations Mgr	973-742-6131
		12/10/2008

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PVSC FORM MR-2 REV .3 6/93



ANALYTICAL DATA REPORT

for Allen Linen 407 20th Avenue Paterson, NJ 07513

Project Name: HANOVER CONTROLS Lab Case Number: E08-13293

MDL = METHOD DETECTION LIMIT

Metals

Lab ID: 13293-001 Client ID; 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 11/19/2008

Time Sampled: NA Date Analyzed: 12/2/08

MDL **Parameter** Result Q 0.008 Copper 0.060 0.008 0.158 Zinc

General Analytical

Lab ID: 13293-001 Client ID: 01

Percent Moisture: 100

Date Sampled: 11/19/2008

Time Sampled: NA

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	542	2.00-	Aqueous-mg/L	11/19/2008 15:30
Total Suspended Solids	111	25.0	Aqueous-mg/L	11/20/2008 11:00
TPH- SGT HEM	ND	5.05	Aqueous-mg/L	12/4/2008 13:00

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:

Michael H. Leftin, Ph. Laboratory Director,

273 Franklin Road Randolph, NJ 07869 Phone: 973 361 4252 Fax: 973 989 5288



iAL is a NELAC New Jersey Certified Lab (14751) and meintains certification in Connected (1914-0609), New York (11402), Flankly Island (1912-3), Perussylvania (68-00773) and in the Department of Nevy IR QA Progrem

Allen Linen Process Water Meter Reading

11/01/08 starting water meter reading 91076614 gallons 11/30/08 ending meter reading 92575093 gallons 92575093 91076614 1498479gallons

1498479<u>total gallons</u> for the month of November 1498479 divided by 16 days= <u>93654gallons</u> per day

Far #.(973) 989-5288					CARLAR					annon announded	
CUSTOMER INFO		REP	REPORTING INFO	NFO -		Turnuround Time (starts the following day Camples rec'd at lab > 5PM	ie following day if ss	mples rec'd	it in b > 5P/M)		
Company: Alten Linen	REPO	REPORT TO: HANOVER CONTROLS	OVER CON	TROUS		Cab notification is required for RUSH TAT prior to sample arrival RUSH TAT 18 NOT	d for RUSH TAT	prior to san	nple arrival. R	USH TAT IS	10
Address: 407 20th ave	Address:	ss: II W	11 Windsor W.			INCARANTELD WILLIOUT LABAPPROVAL, RISH SURCHARGES WILL, APPLY IF ABLE TO ACCOMMODATE**		Z Z	SI RCINK	ES WILL APP	
PATERSON, NJ 07513		East	East Hanover, NJ 07936	7936		Conditional TPHC	Resulte	Results account by:	Rush TAT Charge **	Report Format DISKETTE	DISKETTI
Telephone #:	Attn:	John (John Ceresnak			24 hr 48 hr 72 hr	NA			Results Only	.dbf format
Fax #;	FAX#	E-Mail				Verbal/Fax 2 wk/Std	Tr Pri		24 hr - 100%	Reduced	.wk! format
Project Manager:	INVO	INVOICE TO:		HANOVER CONTROLS	OLS	24 hr* 48 hr* 72 hr* 1 wk*	wk*		72 br - 50%	Regulatory	12
Sampler: HANOVER CONTROLS	Address:	:88	11 Windsor Way	or Way		Hard Copy 3 wk/Std	Pi		5 day - 25%	Other (describe)	custom EDD
Project Name: PVSC MONITORING			East Han	East Hanover, NJ 07936	936	9			b-9 day 10%		DISK/CD REC
Project Location (State):							ANALYTICAL PARAMETERS	RAMETER	S		
Bottle Order #:	Attn:		John Ceresnak	snak						Cooler Temp.	ر ا ا
Quote#:	PO#						1-0				
			Sample Matrix				5			PRESERVATIVES	Arives
SAMPLE INFORMATION	DW - Drii OL - Oil S - Soil	DW - Drinking Water AQ - Aqueous WW - Waste W OL-Oil LIQ - Liquid (Specify) OT - Other (Specify) S-Soil SL - Studge SOL - Solid W - Wine	AQ - Aqueous WW - Waste Water (Specify) OT - Other (Specify) SOL - Solid W - Wine	Vaste Water specify)		BOD CU	M31				
Client ID De	Depth	Sampling	Time		# IAL#	N7 22	7 1_L		-	FON FON FOH	ous ther
01- WASTEWATER COMPOSITE N	NA 11/11	800		M.M.	2	×	×			11 N	0
waste Glab N	N/8	20/61		9	- 1		5			•	*
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Known Hazard; Yes or No Describe:						Cone. Expected:	Low Med High	4.			
Please print legibly and fill out completely. Samples cannot be processed and ambiguities have been resolved.	ely. Samples ca	nnot be proce		e turnaro	und time w	the turnaround time will not start until any	1 1	GWQS - S	CC - OTHER (MDL Rog. GWQS - SCC - OTHER (SEE COMMENTS)	15)
Signature/Company		Date Time		Signatu	Signature/Company 4		:streem unco	٠			
9		19-Nov	Received by:	1	Lamon,	\ \ \ !	Commons	4			
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